

Application #

* Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546
910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits

Application for Residential Building and Trades Permit

Owner's Name:	Mattamy Homes LLC	Date	1/17/20)24		
Site Address:	96 Providence Creek Drive, Fuquay Varina	a NC 2752	6P	hone	9192333886	
Subdivision:	Providence Creek		Lot		34	
Description of Pr	oposed Work: Single Family Dwelling		Total Job	Cost_	\$213,886.40	
	General Contractor Info	ormation				
Mattamy Homes LLC			9192333886			
Building Contractor's Company Name			Telephone			
11000 Regency Pkwy Cary, NC 27518			_Raleigh_PlanReview@mattamycorp.com			
Address			Email Add			
49775 License #	HEATED SQ FT 2324	GARAGE	SQ FT	<u>434</u>		
Electrical Contractor Information						
Description of W	ork Wiring Service		_Amps ¬	T-Pole	: <u>yes</u> YesNo	
Ideal Electri		734-9	27-7440			
Electrical Contra	ctor's Company Name	-	Telephone	9		
	iami Blvd Durham, NC 27703				lec.com	
Address			Email Add	lress		
27098 License #						
License #	Mechanical/HVAC Contracto	r Informa	tion			
Description of W	ork HVAC System					
•	eating & Air Conditioning Inc.		19683242			
Mechanical Contractor's Company Name			Telephone			
1094 Classic Road Apex, NC 27539						
Address	SIO RODA APEX, NO 27000	I	Email Add	lress		
35139						
License #						
	Plumbing Contractor Inf					
Description of W	ork Plumbing		# Baths		2.5	
			9195334455			
Plumbing Contractor's Company Name			Telephone			
PO Box 934 Clayton, NC 27528			Email Address			
Address			Emaii Add	iress		
27132 License #						
ΕΙΟΟΙΙΟΟ π	Insulation Contractor Inf	formation				
Live Green Inc.	5001 Old Poole Rd Raleigh, NC 27610	_	91945364	411		
Insulation Contractor's Company Name & Address			Telephone			



*NOTE: General Contractor / owner must fill out and sign the second page of this application.

I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and that by signing below I have obtained all subcontractors permission to obtain these permits and if any changes occur including listed contractors, site plan, number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

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EXPIRED PERMIT FEES - 6 Months to 2 years permit re-is:	sue fee is \$150.00. After 2 years re-issue fee
is as per current fee schedule.	
Signature of Owner/Contractor/Officer(s) of Corporation	1/17/2024
Signature of Owner/Contractor/Officer(s) of Corporation	Date
Affidavit for Worker's Compe The undersigned applicant being the:	nsation N.C.G.S. 87-14
General Contractor Owner Of	ficer/Agent of the Contractor or Owner
Do hereby confirm under penalties of perjury that the persor set forth in the permit:	n(s), firm(s) or corporation(s) performing the work
Has three (3) or more employees and has obtained w	vorkers' compensation insurance to cover them.
Has one (1) or more subcontractors(s) and has obtain them.	ned workers' compensation insurance to cover
Has one (1) or more subcontractors(s) who has their covering themselves.	own policy of workers' compensation insurance
Has no more than two (2) employees and no subcont	ractors.
While working on the project for which this permit is sought in Department issuing the permit may require certificates of costo issuance of the permit and at any time during the permitted carrying out the work.	verage of worker's compensation insurance prior
Sign w/Title:	Date: